

FEC FORM 2
STATEMENT OF CANDIDACY

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13 SEP 23 PM 2:27

1. (a) Name of Candidate (in full) Kay R. Hagan		
(b) Address (number and street) 305 Meadowbrook Terrace		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code Greensboro NC 27408		2. Candidate's FEC Identification Number S8NC00239
4. Party Affiliation DEMOCRATIC PARTY		5. Office Sought Senate
6. State & District of Candidate NC 00		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Hagan for US Senate, Inc.		
(b) Address (number and street) PO Box 29103		
(c) City, State, and ZIP Code Greensboro DC 27429		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) Hagan Victory Fund		
(b) Address (number and street) 600 Pennsylvania Ave SE Suite 210		
(c) City, State, and ZIP Code Washington DC 20003		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Kay R. Hagan	Date 08/28/2013
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Texans for a Progressive Senate

(b) Address (number and street)

600 Pennsylvania Ave SE
Suite 210

(c) City, State and ZIP Code

Washington

DC

20003

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Off the Sidelines: LA NC NH

(b) Address (number and street)

600 Pennsylvania Ave SE
Suite 210

(c) City, State and ZIP Code

Washington

DC

20003

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Louisiana North Carolina & Rhode Island Victory 2014

(b) Address (number and street)

600 Pennsylvania Ave SE
Suite 210

(c) City, State and ZIP Code

Washington

DC

20003

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FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Louisiana North Carolina Victory 2014

(b) Address (number and street)

600 Pennsylvania Ave SE
Suite 210

(c) City, State and ZIP Code

Washington

DC

20003

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Hagan Coons Victory Fund

(b) Address (number and street)

600 Pennsylvania Ave SE
Suite 210

(c) City, State and ZIP Code

Washington

DC

20003

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

North Carolina/New Hampshire Victory Fund

(b) Address (number and street)

600 Pennsylvania Ave SE
Suite 210

(c) City, State and ZIP Code

Washington

DC

20003

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ADDITIONAL]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Kay Hagan Senate Victory

(b) Address (number and street)

120 Maryland Avenue NE

(c) City, State and ZIP Code

Washington

DC

20002

DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ADDITIONAL]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

North Carolina Senate Victory 2014

(b) Address (number and street)

120 Maryland Avenue NE

(c) City, State and ZIP Code

Washington

DC

20002

DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)

[ADDITIONAL]

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code

13020412950

NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT
HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
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United States Senate

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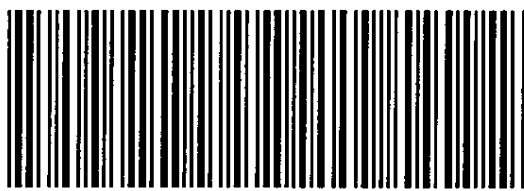
PREPARER

DH

DATE PREPARED

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